COPIES TO:		
	APPLICANT	
	BUILDING	
	CAMO	
	HIGHWAY	
	WATER	



TOWN OF NEW WINDSOR

555 UNION AVENUE, NEW WINDSOR, NY 12553 845.563.8800

NUMBER:_

WORK PERMIT

DIG SAFELY NEW YORK: 1.800.962.7962

WWW.DIGSAFELYNEWYORK.COM

DITCH INSPECTION			HORIZATION	(.()MPLF	TED & APPROVED	
DITCH INCDECTION	DATE	FEE	ВУ	DATE	BY	
DITCH INSPECTION						
DRIVEWAY						
SEPTIC (new)						
SEPTIC (repair/replace) **NEED TO SHOW P/E REPORT						
SEWER (new)						
SEWER (repair)						
LAWN SPRINKLER **NEED CAMO REVIEW FIRST						
STREET OPENING						
WATER						
WELL		NO FEE				
ATE:				BLOCK:	LOT:	
WNER NAME:						
ONTRACTOR: WER DISTRICT: PTIC or SEWER: ATER / WELL INFORMATION	:	DESCRIPTION	WATER N OF WORK (See Specificat	ENCY PHONE: DISTRICT: ion Sheets)		
CCOUNT #:		METER #	#:	REMOTE #: _		
NSPECTIONS: 1) DITCH: _			2) FINA	L:		
* * * STREET OPE	<mark>ning per</mark>	_	ID MUST BE OBTAINE FEET OF A TOWN RO		RKING WITHIN	
IGHWAY / STREET OPENING:						
RIVEWAY CONSTRUCTION: _						
HECK #:						
	HECK FROM:			CASH FROM:		
			CASH FROM:			

- Failure to comply with this ordinance is punishable by a fine of \$50.00 for each offense.
- Prior to excavation, the contractor is required to notify the appropriate town department 24 hours in advance.
- All work must be done on the highway before 3:30 p.m.
- To avoid delays, notify the town inspector 24 hours in advance for inspection.
- All facilities must be inspected prior to being backfilled.
- 6. All permits are valid for a period of one (1) year from date of issuance.

Sanitation Dept. 845.561.2550 Sanitary Sewers / Septic Systems

Water Dept. 845.563.4636 Water Lines

Highway Dept. 845.567.1789 Highway / Street / Driveway Building Dept. 845.563.4618 Septic Systems / Wells Underground Utilities 1.800.962.7962 Electric / Gas / Telephone

USE FOR WATER PERMITS

The following has been prepared for and picked up by the applicant or agent thereof:

	(check those that apply)
	WATER METER
	MXU (Remote)
	Tailpieces
	Gaskets
	Wire
	MXU Instruction Sheet
	Final Inspection Checklist
ate ate at	* * * * * * * * * * * * * * * * * * * *
* * *	· * * * * * * * * * * * * * * * * * * *
DATE:	
	Signature – Water Dept. Representative
DATE:	
Prepared by:	
	Signature – Applicant or Agent